					Application or Docket Number								
PATENT APPLICATION FEE DETERMINATION RECORD													ĺ
		Effect			<u> 973</u>	.5	309		ĺ				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL EN	ITITY	OR	OTHER		
то	TAL CLAIMS		21				RAT		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBI	NUMBER EXTRA		SIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS					·	• 1		(S 9=		OR	X\$18 <i>≟</i>	198	
INDEPENDENT CLAIMS			フ minus 3 = * し				X4			OR	X86=	344	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				÷145=			OR	+290=		
• If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2				TOTAL		OR	TOTAL	1312.	þ
İ	CI	LAIMS AS A	MENDED	- PAR	T II		•	- 1		j	OTHER		
		(Column 1)		(Column 2) (Colu			SI	SMALL ENTITY		OR	SMALL	E#F!TY	
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	• 3/	Minus	-3	,	= /	×	(S 9=		OR	X\$18≠		
MEN	Independent	• 2	Minus	***	2		×	(43=		OR	X86=		
		NTATION OF MI			T CLAIM			·			+290=		1
Y KY 23/28,2939, 7,								145=		OR	TOTAL	 	1
'								OIT. FEE		OR	ADDIT. FEE		1
		(Column 1)	т —		imn 2) HEST	(Column 3)	1 <u>-</u>		- ADDI	1		ADDI-	4
NT B		REMAINING AFTER AMENDMENT		NUM PREVI	MBER HOUSLY D'FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	TIONAL	
AMENDMENT	Total	,	Minus	**		=] [>	(\$ 9=		OR	X\$18=		
MEN	Independent	•	Minus	***		=] ;	X43=	<u> </u>	OR	X86=		1
٧	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		╛┝╴		 	1	1	1	7
							Ľ	145=	<u> </u>	OR	L. TOTAL	 	4
TOTAL ADDIT. FEE										OR	ADDIT. FEI		۷
(Column 1) (Column 2) (Column 3)													_
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	L
N N	Total	•	Minus	••		=] [;	X\$ 9=		ОЯ	X\$18=		
	Independent	•	Minus	••••		1=	」 [-	X43=		OF	X86=		_
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-	1		1	_
		1 1 15 1	the estational		de "O" in C	oluma 3	Ľ	145=		OR	L		_
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OPTION OF TOTAL ADDIT. FEE											_		
	'II the "Highest Nu The "Highest Nur	imber Previously Pa mber Previously Pa	and For IN IM	x Indeper	: 15 1655 171 1den11 15 17	ian 3, enter 3. ie highest numb	er lound	in the ap	ppropriate o	סא וח כ	column 1		

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